Case 16-18523 Doc 1 Filed 06/03/16 Entered 06/03/16 14:46:51 Desc Main Document Page 1 of 63

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ■ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself | | |
|-----|--|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | April First name L Middle name | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Burton Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you ha | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2803 | |

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Case number (if known)

Debtor 1 April L Burton

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | 12 Tower Court | If Debtor 2 lives at a different address: |
| | | Downers Grove, IL 60516 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | DuPage | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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| Par | Tell the Court About | our Ba | nkruptcy Ca | se | | | | | |
|-----|---|--------------------------|-------------------------------|---|-------------------------|---|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are | | | rief description of each, see // go to the top of page 1 and cl | | | .C. § 342(b) for Individu | uals Filing for Bankruptcy | |
| | choosing to file under | ☐ Chapter 7 ☐ Chapter 11 | | | | | | | |
| | | | | | | | | | |
| | | ☐ Cha | apter 12 | | | | | | |
| | | ■ Cha | apter 13 | | | | | | |
| 8. | How you will pay the fee | | about how yo | entire fee when I file my pe u may pay. Typically, if you an attorney is submitting your pa address. | e paying | the fee yourself, | you may pay with cash | n, cashier's check, or money | |
| | | | | the fee in installments. If yo | | this option, sign | and attach the Applica | ation for Individuals to Pay | |
| | | | Ū | e <i>in Installment</i> s (Official Forn t my fee be waived (You ma | , | this option only i | f you are filing for Char | oter 7. By law, a judge may | |
| | | - k | out is not requapplies to you | | nay do so ble to pay | only if your inco the fee in install | me is less than 150% of lments). If you choose | of the official poverty line that this option, you must fill out | |
| 9. | Have you filed for bankruptcy within the last 8 years? | □ No. ■ Yes | | | | | | | |
| | · | | | Northern District of IL, | | | | | |
| | | | District | Eastern Division | When | 4/16/13 | Case number | 13-15874 | |
| | | | District | | When | | Case number | | |
| | | | District | | When | | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | | | | | | | |
| | | | Debtor | | | | Relationship to y | ou | |
| | | | District | | When | | Case number, if | known | |
| | | | Debtor | | | | Relationship to y | /ou | |
| | | | District | | When | | Case number, if | known | |
| 11. | Do you rent your | □ No. | Go to li | ne 12. | | | | | |
| | residence? | ■ Yes | . Has yo | ur landlord obtained an eviction | on judgme | ent against you a | nd do you want to stay | in your residence? | |
| | | | | No. Go to line 12. | | | | | |
| | | | | Yes. Fill out <i>Initial Statement</i> bankruptcy petition. | About ar | Eviction Judgme | ent Against You (Form | 101A) and file it with this | |

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Document Case number (if known) Debtor 1 April L Burton

| Par | t 3: Report About Any Bu | sinesses ` | You Own | as a Sole Propriet | or | | |
|------|---|------------------------|--|--|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of bus | iness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | |
| | If you have more than one sole proprietorship, use a | | Numb | er, Street, City, Stat | e & ZIP Code | | |
| | separate sheet and attach it to this petition. | | Chec | Check the appropriate box to describe your business: | | | |
| | | | | | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | - ' ' ' | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B). | | | | |
| | For a definition of small | No. | I am not filing under Chapter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | Penort if You Own or | Have Any | Hazardo | us Property or Any | y Property That Needs Immediate Attention | | |
| | Do you own or have any | | i iazai uc | da i roperty of Air | y Property That Needs infinediate Attention | | |
| 1-1. | property that poses or is | No. | | | | | |
| | alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number Street City State 9 7in Code | | |
| | | | | | Number, Street, City, State & Zip Code | | |

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Debtor 1 April L Burton

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 April L Burton **Answer These Questions for Reporting Purposes** Part 6: Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ April L Burton Signature of Debtor 2 April L Burton Signature of Debtor 1 Executed on June 2, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 April L Burton Page 7 of 63 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Kevin F | Rouse ARDC | Date | June 2, 2016 |
|-----------------|------------------------|---------------|------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Kevin Rou | se ARDC | | |
| Ledford, V | Vu & Borges, LLC | | |
| 105 W. Ma | dison | | |
| 23rd Floor | • | | |
| Chicago, I | L 60602 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 312-853-0200 | Email address | notice@billbusters.com |
| #6284394 | | | |
| Bar number & St | tate | | |

| | | Docum | ent Page 8 of 63 | 3 | |
|---------------------|--------------------------|-------------------|------------------|---|------------------------------------|
| Fill in this inform | mation to identify your | case: | | | |
| Debtor 1 | April L Burton | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|--|-------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 30,240.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 30,240.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 27,000.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 88,523.13 |
| | Your total liabilities | \$ | 115,523.13 |
| Paı | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 5,235.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,681.30 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Page 9 of 63
Case number (if known) Debtor 1 April L Burton

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,192.85 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 61,449.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 61,449.00 |

| | | Documen | t Page 10 of 63 | | |
|---|---|---|---|--------------------------------|---|
| Fill in this info | ormation to identify your | case and this filing: | | | |
| Debtor 1 | April L Burton | | | | |
| 20010. | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | |
| Case number | | | | | Objects to the factor and |
| Case Hullibel | | | | | ☐ Check if this is an amended filing |
| | | | | | · · |
| o | / . | | | | |
| Official F | orm 106A/B | | | | |
| Schedu | ıle A/B: Prop | pertv | | | 12/15 |
| | | | e. If an asset fits in more than o | ne category, list the asset in | the category where you |
| | nore space is needed, attach | | people are filing together, both a On the top of any additional pag | | |
| Part 1: Descri | be Each Residence, Buildin | g, Land, or Other Real Estate Yo | ou Own or Have an Interest In | | |
| | | <u></u> | | | |
| . you own o | or nave any legal or equitable | e interest in any residence, bui | Iding, land, or similar property? | | |
| No. Go to I | Part 2. | | | | |
| ☐ Yes. When | re is the property? | | | | |
| Day O. Darasi | ha Varra Vahialaa | | | | |
| Part 2: Descri | be Your Vehicles | | | | |
| B. Cars, vans, □ No ■ Yes | trucks, tractors, sport u | tility vehicles, motorcycles | | | |
| 3.1 Make: | Chevrolet | Who has an interes | t in the property? Check one | Do not deduct secured cl | |
| Model: | Impala | Debtor 1 only | | Creditors Who Have Clair | ed claims on Schedule D: ms Secured by Property. |
| Year: | 2014 | Debtor 2 only | | Current value of the | Current value of the |
| Approxin | mate mileage: 28 | Debtor 1 and Deb | otor 2 only | entire property? | portion you own? |
| Other inf | formation: | At least one of the | e debtors and another | | |
| | | ☐ Check if this is c | community property | \$27,000.00 | \$27,000.00 |
| | | (see instructions) | | | |
| Examples: B No Yes S Add the do pages you Part 3: Descri | ollar value of the portion have attached for Part 2 | sonal watercraft, fishing vesse you own for all of your entr . Write that number here | vehicles, other vehicles, and also snowmobiles, motorcycle a lies from Part 2, including an | y entries for | \$27,000.00 |
| Do you own o | or have any legal or equi | table interest in any of the fo | ollowing items? | | Current value of the portion you own? |
| | | | | | Do not deduct secured |
| Household | goods and furnishings | | | | claims or exemptions. |
| , Household | goods and runnishings | | | | |

Examples: Major appliances, furniture, linens, china, kitchenware

 \square No

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Case 16- | | Doc 1 | Filed 06/03/16 Document | Entered 06/03/16 14: Page 11 of 63 Case number | 46:51 | Desc Main |
|---------------------------------------|--|------------------------|--|---|--|-------------|--------------------------------|
| ■ Ves | . Describe | | | | | , | |
| | . Describe | Lovesea Table/C | at, Coffee ⁻ hairs,Micro | Table, End Tables, I | Dishes/Flatware, Vacuum, | | \$300.00 |
| | | Discour | nt Furniture | e: Dresser, Mirror, T | able & Chairs | | \$600.00 |
| □ No | oles: Televisions a | phones, ca | ameras, medi | a players, games | oment; computers, printers, scanner | rs; music c | ollections; electronic devices |
| | | Phone. | on sets, Di | 7D Player, Compute | er, Tablet, Stereo, and Cell | | \$1,000.00 |
| Examp | ibles of value bles: Antiques and other collecti | | | | oks, pictures, or other art objects; st | amp, coin, | or baseball card collections; |
| | | CDs | | | | | \$10.00 |
| Examp No □ Yes 10. Firear Exam No | musical instru . Describe | ographic, ex uments | ercise, and o | ther hobby equipment; , and related equipmen | bicycles, pool tables, golf clubs, skis | s; canoes a | and kayaks; carpentry tools; |
| □ No | | othes, furs, | leather coats | s, designer wear, shoes | , accessories | | |
| ☐ No | | | ary Wearing | | ding rings, heirloom jewelry, watche | es, gems, g | \$50.00 sold, silver |
| | | Costum | e jewelry | | | | \$0.00 |
| Exam ■ No □ Yes | arm animals apples: Dogs, cats, Describe ther personal an | | | ı did not already list, i | ncluding any health aids you did | not list | |

| | Case 16-18 | 3523 Doc 1 | | Entered 06/03/16 14:46:51 | Desc Main |
|----------------------|--|--|---|--|---|
| Debtor 1 | April L Burton | | Document P | age 12 of 63 Case number (if know | n) |
| ☐ Yes | . Give specific inform | mation | | | |
| | | • | rom Part 3, including any | entries for pages you have attached | \$1,960.00 |
| Part 4: D | escribe Your Financial | l Assets | | | |
| | | | rest in any of the following | 1? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ☐ No | | | our home, in a safe deposit | box, and on hand when you file your pe | tition |
| | | | | Cash | \$30.00 |
| □ No | | | counts with the same institu | · | e nouses, and other similar |
| | | 17.1. Checking | Chase Bank | <u> </u> | \$250.00 |
| | | 17.2. Savings | Chase Bank | 3 | \$1,000.00 |
| Exan ■ No | s, mutual funds, or paples: Bond funds, inv | | vith brokerage firms, money | market accounts | |
| 19. Non- p | | k and interests in ir | ncorporated and unincorp | orated businesses, including an inter | est in an LLC, partnership, and |
| ■ No □ Yes | . Give specific inform | mation about them Name of entity: | | % of ownership: | |
| Nego Non- ■ No | tiable instruments inc | clude personal check ts are those you can | r negotiable and non-negons, cashiers' checks, promise not transfer to someone by | sory notes, and money orders. | |
| | ement or pension ac aples: Interests in IRA | | 1(k), 403(b), thrift savings a | ccounts, or other pension or profit-sharir | ng plans |
| _ | . List each account se | | | | |
| | | eparately. Type of account: | Institution nam | ne: | |
| | rity deposits and pre share of all unused d | Type of account: epayments deposits you have ma | ade so that you may continu | ne: ne service or use from a company c, gas, water), telecommunications comp | panies, or others |

Official Form 106A/B Schedule A/B: Property page 3

■ Yes.

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Case number (if known)

Document Debtor 1 **April L Burton**

| | r | Rental deposit | Security Deposi | t with Landiord: \$2,000.00 | \$0.00 |
|-----|---|--|------------------------------------|--|---|
| 23. | Annuities (A contract for a | periodic payment of mone | ey to you, either for life or f | or a number of years) | |
| | ■ No □ Yes Issuer | name and description. | | | |
| 24. | 26 U.S.C. §§ 530(b)(1), 529 | | ualified ABLE program, o | or under a qualified state tuition pr | ogram. |
| | ■ No ☐ Yes Institu | tion name and descriptio | n. Separately file the recor | ds of any interests.11 U.S.C. § 521(c |): |
| | Trusts, equitable or future ■ No □ Yes. Give specific information | | other than anything listed | l in line 1), and rights or powers ex | ercisable for your benefit |
| | Patents, copyrights, trade Examples: Internet domain | marks, trade secrets, aı | | | |
| | ■ No □ Yes. Give specific information | ation about them | | | |
| | Licenses, franchises, and Examples: Building permits □ No | | | gs, liquor licenses, professional licens | ses |
| | ■ Yes. Give specific information | ation about them | | | |
| | | State of Illinois I | LPN License | | \$0.00 |
| Me | oney or property owed to yo | ou? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you ■ No □ Yes. Give specific information | ution about them, includin | g whether you already filed | d the returns and the tax years | |
| | Family support Examples: Past due or lum No ☐ Yes. Give specific informa | , , , , , , , , , , , , , , , , , , , | support, child support, mair | ntenance, divorce settlement, propert | y settlement |
| | benefits; unpaid ■ No | disability insurance paym I loans you made to some | | ck pay, vacation pay, workers' compe | ensation, Social Security |
| | Yes. Give specific informations | | | | |
| | Interests in insurance poli Examples: Health, disability □ No | | savings account (HSA); c | redit, homeowner's, or renter's insura | ince |
| | ■ Yes. Name the insurance | company of each policy a Company name: | and list its value. | Beneficiary: | Surrender or refund value: |
| | | Whole Life Insurance American Income L Company - No Casl (Issue Date: 11/21/2 | ife Insurance n Surrender Value | | \$0.00 |

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Case number (if known) Document Debtor 1 **April L Burton**

> Whole Life Insurance Policy with **American Income Life Insurance** Company - No Cash Surrender Value

\$0.00 (Issue Date: 11/18/2015) 32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$1,280,00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

- 37. Do you own or have any legal or equitable interest in any business-related property?
 - No. Go to Part 6.
 - ☐ Yes. Go to line 38.

☐ Yes. Give specific information..

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

- 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?
 - No. Go to Part 7.
 - ☐ Yes. Go to line 47.

Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☐ Yes. Give specific information.......
- 54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 **April L Burton**

| Part | 8: List the Totals of Each Part of this Form | | | |
|------|--|-------------|------------------------------|-------------|
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$27,000.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,960.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$1,280.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$30,240.00 | Copy personal property total | \$30,240.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$30,240.00 |

Official Form 106A/B Schedule A/B: Property page 6 Case 16-18523 Doc 1 Filed 06/03/16 Entered 06/03/16 14:46:51 Desc Main Page 16 of 63 Document

| Fill in this information to identify your case: | | | | | | | | |
|---|--------------------------------------|--|---|--|--|--|--|--|
| April L Burton | | | | | | | | |
| First Name | Middle Name | Last Name | | | | | | |
| | | | | | | | | |
| First Name | Middle Name | Last Name | | | | | | |
| nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | | | |
| | | | | | | | | |
| | | | | ☐ Check if this is an | | | | |
| | | | | amended filing | | | | |
| | April L Burton First Name First Name | April L Burton First Name Middle Name First Name Middle Name | April L Burton First Name Middle Name Last Name First Name Last Name | April L Burton First Name Middle Name Last Name First Name Middle Name Last Name | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | y the Pi | roperty | You | Claim | as Exem | ıpt |
|---------|----------|----------|---------|-----|-------|---------|-----|
| | | | | | | | |

| · | identify the Froperty rod oldini do E | Acilipt | | | | | | | |
|----|--|--------------------------------------|--|------------------------------------|--|--|--|--|--|
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | n if your spouse is filing with you. | | | | | | |
| | ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | | |
| | ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | | | | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | | | | | | |
| | 2014 Chevrolet Impala 28,000 miles Line from <i>Schedule A/B</i> : 3.1 | \$27,000.00 | \$2,400.00 | 735 ILCS 5/12-1001(c) | | | | | |
| | | | | | | | | | |

| Television sets, DVD Player, | \$1,000.00 | \$1,000.00 | 735 ILCS 5/12-1001(b) | |
|---|------------|---|-----------------------|--|
| Loveseat, Coffee Table, End Tables, Dining Table/Chairs, Microwave, Pots/Pans, Dishes/Flatware, Vacuum Coffee Maker, Bedroom Sets, Lamps, desk, dresser Line from Schedule A/B: 6.1 | , | 100% of fair market value, up to any applicable statutory limit | | |
| Misc used household goods and furnishings, including: Sofa, | \$300.00 | \$300.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 3.1 | | 100% of fair market value, up to any applicable statutory limit | | |
| | | | | |

| Television sets, DVD Player, Computer, Tablet, Stereo, and Cell Phone. Line from <i>Schedule A/B</i> : 7.1 | \$1,000.00 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
|---|------------|---|-----------------------|
| CDs Line from Schedule A/B: 8.1 | \$10.00 | \$0.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |

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Case number (if known)

| De | MOI April L Buiton | | | | | |
|----|--|--|---------|---|------------------------------------|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exemption you claim portion you own | | | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | Necessary Wearing Apparel Line from Schedule A/B: 11.1 | \$50.00 | | \$0.00 | 735 ILCS 5/12-1001(a) | |
| | Line Irom Scriedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Checking: Chase Bank Line from Schedule A/B: 17.1 | \$250.00 | | \$250.00 | 735 ILCS 5/12-1001(b) | |
| L | Line Holli Schedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Savings: Chase Bank Line from Schedule A/B: 17.2 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) | |
| | Line Holli Schedule A/B. 11.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No ☐ Yes. Did you acquire the property cove ☐ No | 3 years after that for ca | ises fi | ŕ | , | |
| | ☐ Yes | | | | | |

| | Ca | ase 16-18523 | Doc 1 Filed 06/03/16 Document | | ed 06/03/16 14:46:5 <u> 8 of 63 </u> | 1 Desc M | 1ain |
|----------------|---------------------------------|---|--|------------------|--|----------------------------------|-----------------------------|
| Filli | n this infor | mation to identify you | | | | | |
| Deb | tor 1 | April L Burton | | | | | |
| | | First Name | Middle Name | Last Name | | | |
| | tor 2 ise if, filing) | First Name | Middle Name | Last Name | | | |
| Unit | ed States Ba | inkruptcy Court for the | : NORTHERN DISTRICT OF ILI | LINOIS | | | |
| Cas (if kno | e number _ | | | | | _ | if this is an ded filing |
| | cial Forr hedule | | s Who Have Claims | Secure | ed by Property | | 12/15 |
| Be as | complete an | d accurate as possible. e Additional Page, fill it | If two married people are filing togeth out, number the entries, and attach it | her, both are | equally responsible for supplying | | |
| . Do | any creditors | have claims secured b | y your property? | | | | |
| | ☐ No. Chec | k this box and submit t | this form to the court with your other | r schedules. | You have nothing else to repo | rt on this form. | |
| | Yes. Fill in | n all of the information | below. | | | | |
| Part | 1 Liet Λ | II Secured Claims | | | | | |
| | | | | | , Column A Colu | mn B | Column C |
| for e | ach claim. If n | nore than one creditor has | more than one secured claim, list the cre s a particular claim, list the other creditor ical order according to the creditor's nan | rs in Part 2. As | Amount of claim Value | e of collateral supports this | Unsecured portion If any |
| 2.1 | Wells Far Finance | go Auto | Describe the property that secures | the claim: | \$27,000.00 | \$27,000.00 | \$0.00 |
| | Creditor's Nam | ie | 2014 Chevrolet Impala 28,00 | 00 miles | | | |
| | | | | | | | |
| | PO Box 2 | 9704 | As of the date you file, the claim is: apply. | : Check all that | | | |
| | Phoenix, | AZ 85038-9704 | Contingent | | | | |
| | Number, Stree | t, City, State & Zip Code | ☐ Unliquidated | | | | |
| | | | Disputed | | | | |
| Who | owes the d | ebt? Check one. | Nature of lien. Check all that apply. | | | | |
| | ebtor 1 only | | ☐ An agreement you made (such as car loan) | mortgage or s | secured | | |
| | ebtor 2 only | | • | | | | |
| | ebtor 1 and D | | Statutory lien (such as tax lien, me | echanic's lien) | | | |
| | | the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| | check if this c community de | laim relates to a ebt | Other (including a right to offset) | Purchase | Money Security Interest | | |
| Date | debt was inc | urred | Last 4 digits of account num | nber | | | |
| Ad | d the dollar v | alue of your entries in C | Column A on this page. Write that num | nber here: | \$27,000.00 | | |

If this is the last page of your form, add the dollar value totals from all pages. \$27,000.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | | Document | Page 1 | 9 of 63 | |
|---------------------------------------|---|---|--|-------------------------------|--|--|
| Fill in | this informa | ation to identify your | case: | | | |
| Debto | r 1 | April L Burton | | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | r 2 if, filing) | First Name | Middle Name | Last Name | | |
| | | | | | | |
| Jnited | l States Banl | kruptcy Court for the: | NORTHERN DISTRICT OF ILI | LINOIS | | |
| Case r | number | | | | | |
| (if knowr | n) | | | | | |
| | | | | | | amended filing |
| Offic | ial Form | 106F/F | | | | |
| | | | ho Have Unsecured | Claims | | 12/15 |
| chedu chedu eft. Atta ame ai | le G: Executor le D: Creditor ach the Conti nd case numl | ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known). | ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re | o not include needed, copy | contracts on Schedule A/B: Property (O any creditors with partially secured cla the Part you need, fill it out, number the do not file that Part. On the top of any a | ims that are listed in entries in the boxes on the |
| Part 1 | | of Your PRIORITY Un | | | | |
| _ | • | s have priority unsecure | d claims against you? | | | |
| | No. Go to Pa | π 2. | | | | |
| ⊔ Part 2 | | of Your NONPRIORIT | V Unacquired Claims | | | |
| | | | cured claims against you? | | | |
| | - | | | | - dul- | |
| | | e nothing to report in this p | art. Submit this form to the court with | your other sche | edules. | |
| | Yes. | | | | | |
| uns tha | secured claim, | , list the creditor separately | y for each claim. For each claim listed | l, identify what t | b holds each claim. If a creditor has more type of claim it is. Do not list claims already three nonpriority unsecured claims fill out | y included in Part 1. If more |
| | | | | | | Total claim |
| 4.1 | Acs | | Last 4 digits of acc | ount number | 8031 | \$0.00 |
| | Nonpriority (| Creditor's Name | | | | · · |
| | 501 Blee Utica, N | | When was the debt | incurred? | Opened 9/01/08 Last Active 12/01/09 | |
| | | eet City State Zlp Code red the debt? Check one. | As of the date you | file, the claim | is: Check all that apply | |
| | Debtor 1 | only | ☐ Contingent | | | |
| | Debtor 2 | 2 only | ☐ Unliquidated | | | |
| | Debtor 1 | and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least | one of the debtors and and | other Type of NONPRIOR | RITY unsecure | d claim: | |
| | ☐ Check if | f this claim is for a comi | munity Student loans | | | |
| | debt Is the claim | n subject to offset? | Obligations arising report as priority claim | | aration agreement or divorce that you did r | not |
| | ■ No | | ☐ Debts to pension | or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | | Other. Specify | | | |
| | | | | Educationa | II/Notice Only | |

Page 20 of 63 Document Debtor 1 April L Burton Case number (if know) 4.2 \$6,541.00 Acs/jp Morgan Chase Ba Last 4 digits of account number 5052 Nonpriority Creditor's Name Opened 11/01/07 Last Active 501 Bleecker St When was the debt incurred? 4/30/16 Utica, NY 13501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational Acs/jp Morgan Chase Ba 4.3 Last 4 digits of account number 5051 \$4,351.00 Nonpriority Creditor's Name Opened 11/01/07 Last Active 501 Bleecker St When was the debt incurred? 4/30/16 Utica, NY 13501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.4 **American First Finance** Last 4 digits of account number 0001 \$1,033.00 Nonpriority Creditor's Name Opened 6/12/15 Last Active 7330 W. 33rd Stree When was the debt incurred? 1/29/16 Wichita, KS 67205 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

☐ Yes

debt

■ No

■ Other. Specify Unsecured

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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| BMO Harris | Last 4 digits of account number | | \$200.00 |
|--|--|---|----------|
| Nonpriority Creditor's Name 115 South LaSalle Street Chicago, IL 60603 | When was the debt incurred? | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Debt Owed | <u> </u> | |
| Capital One | Last 4 digits of account number | 0136 | \$601.00 |
| Nonpriority Creditor's Name | | Opened 4/01/14 Last Active | |
| Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | 2/16/15 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit Card | 1 | |
| Capital One | Last 4 digits of account number | 8822 | \$291.00 |
| Nonpriority Creditor's Name | | | <u> </u> |
| Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 7/01/14 Last Active 2/16/15 | |
| Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| □Yes | ■ Other. Specify Credit Card | 1 | |

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Case number (if know) Debtor 1 April L Burton City of Chicago Corporate \$244.00 4.8 Counselor Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle Street When was the debt incurred? Suite 600 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ■ Other. Specify Fines 4.9 ComEd Last 4 digits of account number \$500.00 Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Utilities Other. Specify 4.1 Comenity Bank/Victoria Secret 1718 \$192.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 2/01/14 Last Active Po Box 18215 When was the debt incurred? 4/12/16 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account

☐ Yes

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Number Street City State ZIp Code

Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
Debtor 1 and Debtor 2 only
At least one of the debtors and another
Check if this claim is for a community debt
Is the claim subject to offset?

No

Yes

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

As of the date you file, the claim is: Check all that apply

Contingent

Unliquidated

Type of NONPRIORITY unsecured claim:

Student loans
Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

Educational

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Debtor 1 April L Burton Case number (if know) 4.1 \$4,141.00 Fed Loan Serv 0001 Last 4 digits of account number Nonpriority Creditor's Name Opened 9/01/08 Last Active Po Box 60610 When was the debt incurred? 4/30/16 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Fed Loan Servicing 0004 \$8,653.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 4/01/10 Last Active Po Box 69184 When was the debt incurred? 4/30/16 Harrisburg, PA 17106 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community lacksquare Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 **Fed Loan Servicing** 0008 \$7,173.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 3/01/13 Last Active Po Box 69184 When was the debt incurred? 4/30/16 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

Official Form 106 E/F

☐ Yes

Educational

☐ Other. Specify

| Fed Loan Servicing | Last 4 digits of account number | 0003 | \$4,153.0 |
|---|---|---|------------|
| Nonpriority Creditor's Name | _ | One and 4/04/40 1 == (A = 1)== | |
| Po Box 69184 Harrisburg, PA 17106 | When was the debt incurred? | Opened 4/01/10 Last Active 4/30/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt s the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify | | |
| | Educationa | ıl | |
| Fed Loan Servicing | Last 4 digits of account number | 0007 | \$3,724.00 |
| Nonpriority Creditor's Name Po Box 69184 Harrisburg, PA 17106 | When was the debt incurred? | Opened 3/01/13 Last Active 4/30/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community lebt sthe claim subject to offset? | | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | or plans, and other similar debts | |
| ■ No □ Yes | Other. Specify | g p.as, and other onliner dobto | |
| ⊒ TeS | Educationa | .l | |
| | | | |
| Fed Loan Servicing | Last 4 digits of account number | 0010 | \$1,291.00 |
| Nonpriority Creditor's Name Po Box 69184 | When was the debt incurred? | Opened 2/01/14 Last Active 4/30/16 | |
| larrisburg, PA 17106 | | 7700710 | |
| Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| \square Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |

☐ Yes

Educational

Other. Specify

Document Page 26 of 63 Debtor 1 April L Burton Case number (if know) 4.2 \$965.00 Fed Loan Servicing 0009 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 2/01/14 Last Active Po Box 69184 When was the debt incurred? 4/30/16 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.2 IC Systems, Inc 6001 \$413.00 Last 4 digits of account number Nonpriority Creditor's Name 444 Highway 96 East When was the debt incurred? Po Box 64378 St Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify 11 At T Uverse 4.2 1027 \$7,442.00 Navient Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 10/01/06 Last Active Po Box 9500 When was the debt incurred? 4/30/16 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

Other. Specify

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

Is the claim subject to offset?

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| Debtor | 1 April L Burton | | Case number (if know) | |
|-------------|--|--|--|------------|
| 4.2 | Novient | | 1027 | ¢2 200 00 |
| 3 | Navient Nonpriority Creditor's Name | Last 4 digits of account number | 1027 | \$3,399.00 |
| | Attn: Claims Dept | | Opened 10/01/06 Last Active | |
| Po Box 9500 | | When was the debt incurred? | 4/30/16 | |
| | Wilkes-Barr, PA 18773 | | -1/00/10 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | _ | ■ Student loans | | |
| | ☐ Check if this claim is for a community debt | _ | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | fiation agreement of divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | □Yes | Other. Specify | | |
| | | Educationa | al . | |
| 4.2 | | | | |
| 4 | Nicor Gas | Last 4 digits of account number | | \$40.00 |
| | Nonpriority Creditor's Name | MI | | |
| | PO Box 2020 | When was the debt incurred? | | |
| | Aurora, IL 60507 Number Street City State Zlp Code | As of the date you file, the claim | is: Chack all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim | в. Опеск ан так арргу | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt | _ | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐Yes | Other. Specify Utility | | |
| | | | | |
| 4.2 | | | | |
| 5 | Portfolio Receovery Associates | Last 4 digits of account number | | \$579.88 |
| | Nonpriority Creditor's Name | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | |
| | P.O.Box 41067 | When was the debt incurred? | | |
| | Norfolk, VA 23541 Number Street City State Zlp Code | As of the date you file, the claim | is: Chack all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the dam's | S. Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | _ | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt | _ | protion agreement or diverse that you did a -t | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |

☐ Yes

Other. Specify Lawsuit

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| Debtor | 1 April L Burton | —————————————————————————————————————— | Case number (if know) | | |
|--------|--|--|---|-------------|--|
| 4.2 | Salt Creek Credit Union | Last 4 digits of account number | 2431 | \$3,644.00 | |
| | Nonpriority Creditor's Name | _ | Opened 3/01/14 Last Active | | |
| | 911 N. Elm St., Suite 129 Hinsdale, IL 60521 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| | Yes | Other. Specify Debt Owed | | | |
| 4.2 | Salt Creek Credit Union | Last 4 digits of account number | 2432 | \$1,000.00 | |
| | Nonpriority Creditor's Name | | Opened 5/04/44 Leet Active | | |
| | 911 N. Elm St., Suite 129 Hinsdale, IL 60521 | When was the debt incurred? | Opened 5/01/14 Last Active 5/27/14 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| | Yes | Other. Specify Debt Owed | | | |
| 4.2 | Salt Creek Credit Union | Last 4 digits of account number | | \$15,207.25 | |
| | Nonpriority Creditor's Name 911 N. Elm St., Suite 129 Hinsdale, IL 60521 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one. | · | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | To a CNONDRIODITY | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |

☐ Yes

Other. Specify Debt Owed

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| Debit | April L Burton | Case number (if know) | |
|----------|---|---|------------|
| 4.2 9 | Stellar Recovery Inc | Last 4 digits of account number 1755 | \$619.00 |
| | Nonpriority Creditor's Name 1327 Hwy 2 W | When was the debt incurred? Opened 10/01/15 | |
| | Suite 100 Kalispell, MT 59901 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection Attorney Comcast | |
| 4.3 0 | T-Mobile | Last 4 digits of account number | \$250.00 |
| | Nonpriority Creditor's Name PO Box 742596 Cincinnati, OH 45274-2596 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Cell Phone | |
| 4.3 1 | Village of Alsip | Last 4 digits of account number | \$1,000.00 |
| | Nonpriority Creditor's Name 4500 W. 123rd Alsip, IL 60803 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ∏ Yes | Other Coolin Governmental Fines | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 April L Burton | | Case number (if know) |
|---|--|--|
| Name and Address Arnold Scott Harris, P.C. 111 W. Jackson Blvd Ste 600 Chicago, IL 60604 | On which entry in Part 1 or Part 2 did Line 4.8 of (Check one): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| omougo, ie oooo- | Last 4 digits of account number | |
| Name and Address AT&T U-verse PO Box 5014 Carol Stream, IL 60197 | On which entry in Part 1 or Part 2 did Line 4.21 of (Check one): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Blatt, Hasenmiller, Leibsker 10 S. LaSalle Street, Suite 2200 2015 M1 130660 Chicago, IL 60603 | On which entry in Part 1 or Part 2 did Line 4.25 of (Check one): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address City of Chicago Dept of Revenue P.O. Box 88292 Chicago, IL 60680-1292 | On which entry in Part 1 or Part 2 did Line 4.8 of (Check one): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address City of Chicago Dept. of Finance PO Box 6330 Chicago, IL 60680 | On which entry in Part 1 or Part 2 did Line 4.8 of (<i>Check one</i>): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address COMCAST PO Box 802068 Dallas, TX 75380-2068 | On which entry in Part 1 or Part 2 did Line 4.29 of (Check one): Last 4 digits of account number | you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Comcast PO Box 3002 Southeastern, PA 19398-3002 | On which entry in Part 1 or Part 2 did Line 4.29 of (Check one): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Comcast Cable P.O. Box 15630 Wilmington, DE 19850 | On which entry in Part 1 or Part 2 did Line 4.12 of (Check one): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Evans Lowenstein et al 130 S. Jefferson Suite 350 Chicago, IL 60661 | On which entry in Part 1 or Part 2 did Line 4.11 of (<i>Check one</i>): Last 4 digits of account number | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| N | | |
| Name and Address Linebarger Goggan Blair & PO Box 06152 Chicago, IL 60606-0152 | On which entry in Part 1 or Part 2 did Line 4.8 of (Check one): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address Markoff Law LLC 29 N. Wacker Dr. #550 2015 SR 1448 Chicago, IL 60606 | On which entry in Part 1 or Part 2 did Line 4.28 of (Check one): | you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |

Last 4 digits of account number

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Debtor 1 April L Burton

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total | | | | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 61,449.00 |
| Total claims | | | | |
| rom Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 27,074.13 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 88,523.13 |

| Fill in this infor | | | | |
|---|----------------|-------------------|-------------|-----------------------|
| Debtor 1 | April L Burton | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|--|
| 2.1 Anup Doshi 2837 N. Milwaukee Chicago, IL 60618 | Debtor is Lessee on a Residential Apartment Lease: \$1,300.00 per month. |

| | | Docume | ent Page 33 o | ot 63 | |
|------------------|--|--------------------------------|---------------------------|---------------------------|-------------------------------------|
| Fill in this | information to identify your | case: | | | |
| | | | | | |
| Debtor 1 | April L Burton First Name | Middle Name | Last Name | | |
| Debtor 2 | r not reality | made Hame | <u> </u> | | |
| (Spouse if, fili | ng) First Name | Middle Name | Last Name | | |
| | | NODTHERN BIOTRICT | . 05 11 1 11 10 10 | | |
| United Sta | ites Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case num | her | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | <u>-</u> |
| Officia | I Form 106H | | | | |
| Schoo | lule H: Your Cod | lohtore | | | 40/45 |
| Scried | iule n. Toul Coc | ienioi 2 | | | 12/15 |
| Codebtors | are people or entities who | are also liable for any deb | ts you may have. Be a | as complete and accur | ate as possible. If two married |
| people are | filing together, both are equ | ually responsible for supp | olying correct informa | tion. If more space is r | needed, copy the Additional Page, |
| | | | | to this page. On the to | p of any Additional Pages, write |
| our name | and case number (if known |). Answer every question | • | | |
| 1. Do | you have any codebtors? (If | you are filing a joint case. | do not list either spouse | e as a codebtor. | |
| | , ou nate un, coucute.c. (ii | you are ming a joint cace, | ao not not oknor opouce | as a sociotion. | |
| ■ No | | | | | |
| ☐ Yes | 3 | | | | |
| | | | | | |
| | | | | | ty states and territories include |
| Arizor | na, California, Idaho, Louisiana | ı, Nevada, New Mexico, Pu | erto Rico, Texas, Wash | nington, and Wisconsin.) | |
| ■ Na | . Go to line 3. | | | | |
| | | | | | |
| ⊔ Yes | s. Did your spouse, former spo | ouse, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| 3. In Col | lumn 1, list all of your codeb | tors. Do not include your | spouse as a codebto | r if your spouse is filin | g with you. List the person shown |
| | | | | | he creditor on Schedule D (Official |
| | 106D), Schedule E/F (Officia olumn 2. | il Form 106E/F), or Sched | ule G (Official Form 10 | 06G). Use Schedule D, | Schedule E/F, or Schedule G to fill |
| outo | Oldilli 2. | | | | |
| | Column 1: Your codebtor | | | | editor to whom you owe the debt |
| | Name, Number, Street, City, State and 2 | ZIP Code | | Check all schedule | es that apply: |
| 2.1 | | | | Cabadula D. lia | • |
| 3.1 | Name | | | Schedule D, lir | |
| | | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lir | ne |
| | Number Street | | | | |
| | City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, lir | 00 |
| | Name | | | Schedule E/F, | |
| | | | | ☐ Schedule E/F, | |
| | | | | □ Schedule G, Ilr | ıe |
| | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | | |
|--------------------|--|-------------------------------|---|--------------------------|--|---|--|
| Del | otor 1 April L Burt | on | | | | | |
| | otor 2 puse, if filing) | | | | | | |
| Uni | ted States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | |
| (If kr | fficial Form 106l | ome | | [| | d filing ent showing pos as of the followin | tpetition chapter ng date: 12/1 5 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment | are married and not filing wi | ng jointly, and your spou ith you, do not include in | se is living formation a | with you, included included included in the with the wind in the with the w | ude information ouse. If more sp | n about your bace is needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | Debtor 2 | or non-filing s | pouse |
| | If you have more than one job, | F | ■ Employed | | ☐ Emplo | oyed | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | ☐ Not employed | | |
| | employers. | Occupation | LPN | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Westchester Rehab | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 2901 Wolf Road Westchester, IL | | | | |
| | | How long employed to | here? 01 year | | | | |
| Pai | t 2: Give Details About Mor | nthly Income | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to report | for any line, | write \$0 in the | space. Include | your non-filing |
| | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information for | all employers | s for that perso | n on the lines b | elow. If you need |
| | | | | For | r Debtor 1 | For Debtor 2 non-filing sp | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. \$ | 4,637.00 | \$ | N/A |
| 3. | Estimate and list monthly overt | ime pay. | | 3. +\$ | 0.00 | +\$ | N/A |

Calculate gross Income. Add line 2 + line 3.

4,637.00

N/A

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| Deb | tor 1 | April L Burton | - | C | ase | number (if known) | | | | |
|-----|-----------------------------|---|-----------|-----|---------------|-------------------|--------|------------------|----------------|--|
| | | | | | | Debtor 1 | non-f | ebtor iling s | pouse | |
| | Cop | by line 4 here | 4. | | \$_ | 4,637.00 | \$ | | N/A | <u> </u> |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | ١. | \$ | 560.00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b |). | \$_ | 0.00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | :. | \$_ | 0.00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | l. | \$_ | 0.00 | \$ | | N/A | _ |
| | 5e. | Insurance | 5e | | \$_ | 0.00 | \$ | | N/A | <u>. </u> |
| | 5f. | Domestic support obligations | 5f. | | \$_ | 0.00 | \$ | | N/A | _ |
| | 5g. | Union dues | 5g | | \$_ | 0.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | _ 5h | | \$_ | 0.00 | + \$ | | N/A | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | , | \$_ | 560.00 | \$ | | N/A | <u>.</u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 4,077.00 | \$ | | N/A | <u>. </u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b | | \$ - | 0.00 | \$ | | N/A N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | _ | | · | | | _ |
| | 8d. | settlement, and property settlement. Unemployment compensation | 8c. 8d | | $_{\$}^{\$}-$ | 0.00 | \$ | | N/A N/A | _ |
| | 8e. | Social Security | 8e | | \$ \$ | 1,158.00 | \$ | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$_ | 0.00 | \$ | | N/A | <u> </u> |
| | 8g. | Pension or retirement income | 8g | ' | \$_ | 0.00 | \$ | | N/A | _ |
| | 8h. | Other monthly income. Specify: | _ 8h | 1.+ | \$_ | 0.00 | + \$ | | N/A | <u>.</u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | | 1,158.00 | \$ | | N/ | A |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 5,235.00 + \$ | | N/A | = \$ | 5,235.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | Ť- | | <u> </u> | | | - | 0,200.00 |
| 11. | Star Incli othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depe | | | • | | hedule 11. | | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies | | | | | | 12. | \$ | 5,235.00 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | ? | | | | | · | Combi month | ned ly income |
| | | Voc Evoloin: | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| CHIII- | in this informa | tion to identify | | | | 1 | | |
|------------|--|-------------------------------------|-------------------------------------|--|--|--------------|-------------------------------------|-------------------------------|
| FIII | in this informa | tion to identify yo | ur case: | | | | | |
| Deb | tor 1 | April L Burto | n | | | | ck if this is: | |
| Deb | tor 2 | | | | | | An amended filing A supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ed States Bankr | uptcy Court for the: | NORTH | HERN DISTRICT OF ILLIN | OIS | - | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| | | J: Your I | Exper | ises | | | | 12/15 |
| Be info | as complete a ormation. If m nber (if know | and accurate as | possible eded, atta y questio | . If two married people ar ich another sheet to this | | | | |
| 1. | Is this a join | | | | | | | |
| | ■ No. Go to | | n a sonar | ate household? | | | | |
| | □ 103. D00 | | ii a sepai | ate nousenoia: | | | | |
| | | | t file Offici | al Form 106J-2, Expenses | for Separate House | ehold of Deb | tor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| ۷. | Do not list De Debtor 2. | • | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Daughter | | 15 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | Son (Unemplo | oyea) | | ■ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | | enses include | | No | | | | |
| | | f people other th d your depende | | Yes | | | | |
| Est exp | imate your ex enses as of a | | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| app | licable date. | | | | | | | |
| the | | n assistance and | | government assistance i cluded it on Schedule I: \ | | | Your exp | enses |
| 4. | | r home owners | | uses for your residence. I | nclude first mortgag | e 4. \$ | 6 | 1,300.00 |
| | If not includ | • | - | | | | | |
| | 4a. Real e | state taxes | | | | 4a. \$ | S | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 |
| | • | • | | upkeep expenses | | 4c. \$ | s | 0.00 |
| _ | | owner's associat | | | | 4d. \$ | | 0.00 |
| 5. | Additional n | nortgage payme | ents for vo | our residence, such as ho | me equity loans | 5. \$ | 5 | 0.00 |

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| ebtor 1 April L Burton | Case number (if kr | nown) |
|--|--------------------|----------|
| . Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. \$ | 250.00 |
| 6b. Water, sewer, garbage collection | 6b. \$ | 75.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 0.00 |
| 6d. Other. Specify: Cable | 6d. \$ | 160.00 |
| Cell Phones | \$ | 130.00 |
| Internet | <u> </u> | 60.00 |
| Home Phone | | 90.00 |
| Garbage Collection | \$ | 60.00 |
| Food and housekeeping supplies | 7. \$ | 650.00 |
| Childcare and children's education costs | 8. \$ | 150.00 |
| Clothing, laundry, and dry cleaning | 9. \$ | 200.00 |
| Personal care products and services | 10. \$ | 100.00 |
| . Medical and dental expenses | 11. \$ | 60.00 |
| Transportation. Include gas, maintenance, bus or train fare. | | |
| Do not include car payments. | 12. \$ | 200.00 |
| . Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 100.00 |
| Charitable contributions and religious donations | 14. \$ | 0.00 |
| Insurance. | | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. \$ | 100.00 |
| 15b. Health insurance | 15b. \$ | 210.00 |
| 15c. Vehicle insurance | 15c. \$ | 160.00 |
| 15d. Other insurance. Specify: | 15d. \$ | 0.00 |
| . Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16. \$ | 0.00 |
| Installment or lease payments: | 47- ¢ | 500.00 |
| 17a. Car payments for Vehicle 1 | 17a. \$ | 526.30 |
| 17b. Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| 17c. Other. Specify: | 17c. \$ | 0.00 |
| 17d. Other. Specify: | 17d. \$ | 0.00 |
| Your payments of alimony, maintenance, and support that you did not report as | 18. \$ | 0.00 |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | * — \$ | |
| Other payments you make to support others who do not live with you. | 19. Ψ — | 0.00 |
| Specify: Other real property expenses not included in lines 4 or 5 of this form or on Sche | | ome |
| 20a. Mortgages on other property | 20a. \$ | 0.00 |
| 20b. Real estate taxes | 20b. \$ | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| | 21. +\$ | |
| Other: Specify: Auto Repairs/Maintenance | | 50.00 |
| Postage/Bank Fees | +\$ _ | 30.00 |
| School Expenses & Supplies | +\$ | 20.00 |
| . Calculate your monthly expenses | | |
| 22a. Add lines 4 through 21. | \$ | 4,681.30 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | \$ | ., |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ | 4,681.30 |
| 226. Add line 228 and 225. The result is your monthly expenses. | Ψ – | 4,001.30 |
| Calculate your monthly net income. | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 5,235.00 |
| 23b. Copy your monthly expenses from line 22c above. | 23b\$ | 4,681.30 |
| | _ | , |
| 23c. Subtract your monthly expenses from your monthly income. | _ | 550.70 |
| The result is your monthly net income. | 23c. \$ | 553.70 |
| 4. Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No. | | |
| Yes Explain here: | | |

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| Fill in this infor | mation to identify your | casa: | | | |
|---------------------------------|---|--------------------------|----------------------------|--------------------------|--|
| Debtor 1 | | case. | | | |
| Debior | April L Burton First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | m 106Dec | | | | |
| Declarat | tion About a | ın Individua | l Debtor's So | chedules | 12/15 |
| years, or both. 1 | y or property by fraud i is U.S.C. §§ 152, 1341, 1 in Below | | ikruptcy case can result | in fines up to \$250,00 | 0, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an atto | orney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, , and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sun | nmary and schedules fil | ed with this declaration | on and |
| X /s/ Api | ril L Burton | | x | | |
| April L | Burton ure of Debtor 1 | | Signature of | of Debtor 2 | |

Date _____

Date June 2, 2016

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| Filli | n this inforn | nation to identify you | r case: | | | |
|---------|---------------------------|--|---|------------------------------------|-------------------------------------|------------------------------------|
| Debt | or 1 | April L Burton First Name | Middle Name | Last Name | | |
| Debt | or 2 | | dui raino | <u> </u> | | |
| (Spou | se if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Ba | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| | number _ | | | | | |
| (if kno | wn) | | | | _ | Check if this is an amended filing |
| | | | | | | amended lilling |
| ∩ff | icial Ea | rm 107 | | | | |
| | icial Fo | | Affaire for Individ | luals Eiling for B | ankruntov | 414 |
| | | | Affairs for Individ | | | 4/10 |
| | | | ible. If two married people a attach a separate sheet to t | | | |
| numb | er (if knowi | n). Answer every que | stion. | | | |
| Part | 1: Give D | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. \ | What is you | r current marital statu | is? | | | |
| | ☐ Married | | | | | |
| | ■ Not mar | ried | | | | |
| | | h | lived annulance other than | uhana wasi liwa masu 2 | | |
| 2. I | Juring the ia | ast 3 years, nave you | lived anywhere other than v | wnere you live now? | | |
| ı | □ No | | | | | |
| | Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live nov | V. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | ldress: | Dates Debtor 2 lived there |
| | 11731 S. L Alsip, IL 6 | eamington Ave. 0803 | From-To: 2012 to 2014 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: |
| _ | | | | | | |
| 3. \ | Nithin the la | est 8 vears, did vou e | ver live with a spouse or leg | ial equivalent in a commun | uity property state or territor | rv? (Community property |
| | | | lifornia, Idaho, Louisiana, Nev | | | |
| ı | No | | | | | |
| ı | _ | ake sure you fill out <i>Sci</i> | hedule H: Your Codebtors (Of | ficial Form 106H). | | |
| Part | 2 Evnloi | n the Sources of Vou | r Incomo | | | |
| rait | Explai | n the Sources of You | rincome | | | |
| | | | nployment or from operatin | | | endar years? |
| | | | u received from all jobs and a have income that you receive | | | |
| | □ No | | | | | |
| i | | l in the details. | | | | |
| | | u.o dotano. | D.1. | | 211 | |
| | | | Debtor 1 Sources of income | Gross income | Debtor 2 Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$1.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

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Case number (if known) Document

Debtor 1 April L Burton

| | Debtor 1 | | Debtor 2 | |
|--|---|---|---|---|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, commissions, bonuses, tips | |
| | Operating a business | | ☐ Operating a business | |
| For last calendar year: (January 1 to December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$34,947.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, commissions, bonuses, tips | |
| | Operating a business | | ☐ Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2014) | ■ Wages, commissions, bonuses, tips | \$8,670.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| | ☐ Wages, commissions, bonuses, tips | \$5,200.00 | ☐ Wages, commissions, bonuses, tips | |
| | Operating a business | | ☐ Operating a business | |
| Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cas List each source and the gross inco No Yes. Fill in the details. | pensions; rental income; interse and you have income that y | rest; dividends; money collect you received together, list it or | ed from lawsuits; royalties; an aly once under Debtor 1. | |
| | | | | |
| | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Retirement Income | \$0.00 | | |
| | Daughter's Social Security | \$5,790.00 | | |
| For last calendar year: (January 1 to December 31, 2015) | Retirement Income | \$0.00 | | |
| | Daughter's Social Security | \$15,182.00 | | |
| For the calendar year before that: | | | | |

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| | | Document | Page 41 01 53 | |
|----------|----------------|----------|------------------------|--|
| Debtor 1 | April L Burton | | Case number (if known) | |

| | | | | ebtor 1 | One are imposing from | Debtor 2 | | Onese in |
|----|--|------------------------|--|--|--|---------------------------------|-------------------------------|---|
| | | | | ources of income escribe below. | Gross income from each source (before deductions and exclusions) | Sources of in Describe below | | Gross income (before deductions and exclusions) |
| | | | | aughter's Social ecurity | \$1,158.00 | | | |
| Pa | rt 3: Lis | t Certain Pa | ayments You Ma | ide Before You Filed fo | r Bankruptcy | | | |
| 6. | Are eithe | r Debtor 1's | s or Debtor 2's d | lebts primarily consum | er debts? | | | |
| | □ No. | Neither D | ebtor 1 nor Deb | • | sumer debts. Consumer deb | ots are defined in 1 | 1 U.S.C. § 10 | 1(8) as "incurred by an |
| | | During the | 90 days before g | you filed for bankruptcy, | did you pay any creditor a tot | al of \$6,425* or mo | ore? | |
| | | ☐ Yes | paid that credit | or. Do not include payme | aid a total of \$6,425* or more ents for domestic support obl | | | |
| | | * Subject | | ments to an attorney for 4/01/19 and every 3 yea | this bankruptcy case. ars after that for cases filed o | n or after the date | of adjustment | |
| | Yes. | | | oth have primarily cons | sumer debts. did you pay any creditor a tot | al of \$600 or more |)? | |
| | | □ _{No.} | Go to line 7. | | | | | |
| | | Yes | List below each | , , | aid a total of \$600 or more ar obligations, such as child su | | , , | |
| | Creditor | s Name an | d Address | Dates of paym | nent Total amount | Amount you still owe | Was this p | payment for |
| | Wells F | argo Auto | Finance | Monthly | \$526.30 | \$27,000.00 | ☐ Mortgag | ge |
| | PO Box | | 0.0704 | - | | | ■ Car | |
| | Pnoenix | c, AZ 8503 | 88-9704 | | | | ☐ Credit (| |
| | | | | | | | Loan R | |
| | | | | | | | ☐ Supplie | ers or vendors |
| | | | | | | | U Other_ | |
| 7. | Insiders in of which y a business alimony. | clude your ou are an o | relatives; any ger fficer, director, pe | neral partners; relatives of erson in control, or owner | e a payment on a debt you of any general partners; partn of 20% or more of their votinclude payments for domesting | erships of which you | ou are a gene any managing | eral partner; corporations agent, including one fo |
| | ■ No □ Yes. | Liet all navr | nents to an inside | ar. | | | | |
| | | Name and | | Dates of paym | ent Total amount | Amount you | Reason fo | or this payment |
| | | | | z alec el payli | paid | still owe | | pay |
| 8. | insider? | | | nkruptcy, did you make | e any payments or transfer er. | any property on a | account of a | debt that benefited an |
| | ■ No | | | | | | | |
| | | | ments to an inside | | | | | |
| | Insider's | Name and | Address | Dates of paym | ent Total amount paid | Amount you still owe | | or this payment editor's name |
| Pa | rt 4: Ide | ntify Legal | Actions, Repos | sessions, and Foreclos | ures | | | |

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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| | modifications, and contract disputes. | | | | |
|-----|---|----------------------------|--|--------------------------------|-----------------------|
| | □ No | | | | |
| | Yes. Fill in the details. | | | | |
| | Case title Case number | Nature of the case | Court or agency | Status of th | e case |
| | Salt Creek Credit Union Vs. April L Burton 2015 SR 1448 | Collection | Circuit Court of 18th Judicial Circuit Dupate County, IL | ■ Pending □ On appe □ Conclude | al |
| | Portfolio Receovery Associates VS. April L Burton 2015 M1 130660 | Collection | Circuit Court of Cook County, IL | ■ Pending □ On appe □ Conclude | al |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | perty repossessed, foreclosed | l, garnished, attached | I, seized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | Value of the |
| | | Explain what happene | .d | | property |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No Yes. Fill in the details. Creditor Name and Address | | | Date action was taken | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possession of an a | assignee for the bene | fit of creditors, a |
| Pai | t 5: List Certain Gifts and Contributions | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | etcy, did you give any gif | ts with a total value of more t | han \$600 per person? | ? |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and | Describe the gifts | 3 | Dates you gave the gifts | Value |
| | Address: | | | | |
| 14. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con | | ts or contributions with a tota | al value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that tot | | u contributed | Dates you | Value |
| | more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | al Describe what yo | a contributed | Dates you contributed | value |

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| Pa | rt 6: List Certain Losses | | | | | |
|-----|---|------------------------|--|----------------------------|---|---------------------------|
| 15. | Within 1 year before you filed for bankr or gambling? | uptcy or | since you filed for bankruptcy, did | you lose any | thing because of the | ft, fire, other disaster, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Describe the property you lost and how the loss occurred | Include | be any insurance coverage for the leading the amount that insurance has paid. I | _ist pending | Date of your loss | Value of property lost |
| | | | nce claims on line 33 of Schedule A/B: | Property. | | |
| Pa | rt 7: List Certain Payments or Transfe | rs | | | | |
| 16. | Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition | preparii | ng a bankruptcy petition? | | | erty to anyone you |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not | You | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount of payment |
| | CIN Legal Data Services 4540 Honeywell Ct Dayton, OH 45424 | | \$60.00 for merged, multi-bured report, credit counseling and education courses. | | 05/2016 | \$60.00 |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a No Yes. Fill in the details. | our busin rs made a | less or financial affairs? as security (such as the granting of a s | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | Describe payment paid in e | any property or s received or debts xchange | Date transfer was made |
| | Person's relationship to you | | | | | 1/00/00 10 |
| | Carmax Auto Finance PO BOX44069 Kennesaw, GA 30160 | | 2005 Nissan Murano | trade-in | eceived \$4,000 value. | 4/20/2016 |
| | None/Automobile Dealership | | | | | |
| 19. | Within 10 years before you filed for ban beneficiary? (These are often called asse No Yes. Fill in the details. | | | elf-settled t | ust or similar device | of which you are a |
| | Name of trust | | Description and value of the prop | erty transfer | red | Date Transfer was made |

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Debtor 1 April L Burton

| Pai | rt 8: | List of Certain Financial Accounts, In: | struments, Safe Deposi | t Boxes, and Sto | orage Unit | :s | |
|--|--|---|---|----------------------------|-----------------------|--|---|
| 20. | solo Incl | hin 1 year before you filed for bankruptod, moved, or transferred? ude checking, savings, money market, ones, pension funds, cooperatives, asso | cy, were any financial ac | counts or instru | uments he | eld in your name, or for yo | |
| | | Yes. Fill in the details. | | | | | |
| | | me of Financial Institution and dress (Number, Street, City, State and ZIP le) | Last 4 digits of account number | Type of account instrument | int or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | | you now have, or did you have within 1 h, or other valuables? | year before you filed for | bankruptcy, an | ıy safe dep | posit box or other deposi | tory for securities, |
| | | No Yes. Fill in the details. | | | | | |
| | | me of Financial Institution dress (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. | | | | y? | | | |
| | | me of Storage Facility dress (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe the contents | | Do you still have it? |
| Pai | rt 9: | Identify Property You Hold or Control | for Someone Else | | | | |
| 23. | | you hold or control any property that so someone. | | ude any propert | y you bori | rowed from, are storing f | or, or hold in trust |
| | | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | rner's Name dress (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value |
| Pai | rt 10: | Give Details About Environmental Info | ormation | | | | |
| For | the p | ourpose of Part 10, the following definiti | ons apply: | | | | |
| | toxi | rironmental law means any federal, state c substances, wastes, or material into t ulations controlling the cleanup of these | he air, land, soil, surface | e water, ground | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | |
| | | ardous material means anything an env ardous material, pollutant, contaminant | | as a hazardous | waste, ha | zardous substance, toxio | substance, |
| Rep | ort a | II notices, releases, and proceedings the | at you know about, rega | ardless of when | they occu | ırred. | |
| 24. | Has | any governmental unit notified you that | t you may be liable or po | otentially liable | under or i | n violation of an environr | mental law? |
| | | No Yes. Fill in the details. | | | | | |

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

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Debtor 1 April L Burton

| 25. | have you notified any governmental unit of any | y release of nazardous material? | | | | |
|---------------|---|---|---------|--|------------------------|--------------------|
| | No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State ar ZIP Code) | | Environme know it | ntal law, if you | Date of notice |
| 26. | Have you been a party in any judicial or admini | istrative proceeding under any env | rironm | ental law? | Include settlements | and orders. |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Natu | ire of the c | ase | Status of the case |
| Par | t 11: Give Details About Your Business or Con | nnections to Any Business | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have a | ny of t | he followir | ng connections to an | y business? |
| | A sole proprietor or self-employed in a | trade, profession, or other activity | , eithe | r full-time | or part-time | |
| | ☐ A member of a limited liability company | y (LLC) or limited liability partnersh | nip (LL | -P) | | |
| | ☐ A partner in a partnership | | | | | |
| | ☐ An officer, director, or managing execu | itive of a corporation | | | | |
| | ☐ An owner of at least 5% of the voting o | r equity securities of a corporation | ı | | | |
| | ☐ No. None of the above applies. Go to Part | 112. | | | | |
| | Yes. Check all that apply above and fill in | the details below for each busines | s. | | | |
| | | Describe the nature of the business Name of accountant or bookkeeper | | | Identification number | |
| | Address (Number, Street, City, State and ZIP Code) | | | Do not include Social Security number or ITIN. Dates business existed | | |
| | | ole Proprietorship: Home Help id | | EIN: From-To | DATES? | ?? |
| | | | | | • | |
| 28. | Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties. | did you give a financial statement | to any | one about | your business? Incl | ude all financial |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details below. | | | | | |
| | Name Da Address (Number, Street, City, State and ZIP Code) | ate Issued | | | | |
| Par | t 12: Sign Below | | | | | |
| are t | ve read the answers on this <i>Statement of Financ</i> true and correct. I understand that making a fals a bankruptcy case can result in fines up to \$25 I.S.C. §§ 152, 1341, 1519, and 3571. | se statement, concealing property, | or ob | taining mo | | |
| Apı | April L Burton ril L Burton nature of Debtor 1 | Signature of Debtor 2 | | | | |
| Dat | | Date | | | | |
| | you attach additional pages to Your Statement | of Financial Affairs for Individuals | Filing | for Bankru | uptcy (Official Form 1 | 07)? |
| ■ N Offici | | of Financial Affairs for Individuals Filin | g for B | ankruptcy | | page |

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Case number (if known) Document Debtor 1 April L Burton ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|---|
| \$245 | filing fee | _ |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - By agreement of the parties for prepetition and preconfirmation work, including consultation, drafting petition and plan, 341 meeting, negotiation with creditors, court hearings, amendments etc.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
 - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
 - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: June 2, 2016 | | | |
|---|---------------------------------------|--|--|
| Signed: | | | |
| /s/ April L Burton | /s/ Kevin Rouse ARDC | | |
| April L Burton | Kevin Rouse ARDC #6284394 | | |
| | Attorney for the Debtor(s) | | |
| Debtor(s) | - | | |
| Do not sign this agreement if the amounts | are blank. Local Bankruptcy Form 23c | | |

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In r | e | April L Burton | | | Case No. | |
|------|----------|--|---|--|--|-------------------------------------|
| | | | | Debtor(s) | Chapter | 13 |
| | | DISC | CLOSURE OF COMP | PENSATION OF ATTORN | EY FOR DE | CBTOR(S) |
| 1. | cor | Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or the rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | |
| | | For legal services | s, I have agreed to accept | | \$ | 4,000.00 |
| | | | | ed | | 0.00 |
| | | Balance Due | | | \$ | 4,000.00 |
| 2. | \$_ | 310.00 of the f | filing fee has been paid. | | | |
| 3. | The | e source of the com | npensation paid to me was: | | | |
| | | Debtor | ☐ Other (specify): | | | |
| 4. | The | e source of compen | nsation to be paid to me is: | | | |
| | | Debtor | ☐ Other (specify): | | | |
| 5. | | I have not agreed | to share the above-disclosed co | ompensation with any other person un | less they are memb | bers and associates of my law firm. |
| | | | | ensation with a person or persons who names of the people sharing in the co | | |
| 6. | In | return for the above | e-disclosed fee, I have agreed to | o render legal service for all aspects o | f the bankruptcy c | ase, including: |
| | b. c. | Preparation and fil Representation of t [Other provisions a Exemption | ling of any petition, schedules, s the debtor at the meeting of cre as needed] planning; preparation and | endering advice to the debtor in detern statement of affairs and plan which meditors and confirmation hearing, and a diffiling of reaffirmation agreement USC 522(f)(2)(A) for avoidance of | ay be required; any adjourned hear onts and applicat | rings thereof; |
| 7. | Ву | | | fee does not include the following se dischargeability actions or any | | / proceeding. |
| | | | | CERTIFICATION | | |
| this | I ce | ertify that the forego | oing is a complete statement of g. | f any agreement or arrangement for pa | yment to me for re | epresentation of the debtor(s) in |
| ١, | Jun | e 2, 2016 | | /s/ Kevin Rouse AR | DC | |
| _ | Date | | | Kevin Rouse ARDC | #6284394 | |
| | | | | Signature of Attorney Ledford, Wu & Borg | ies. I I C | |
| | | | | 105 W. Madison | ,00, LLO | |
| | | | | 23rd Floor | | |
| | | | | Chicago, IL 60602 312-853-0200 Fax: | 312-873-4693 | |
| | | | | notice@billbusters. | | |
| | | | | Name of law firm | | |

Case 16-18523 Doc 1

Filed 06/03/16

Entered 06/03/16 14:46:51

LEDORGINDE MYU & Bayec 53, 6fl 63

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

ATTORNEY RETENTION CONTRACT

Client No. / Responsible attorney

Desc Main

CARA signed?

| 1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means Ledford, Wu & Borges, LLC and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of inconsistency. In the event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter shall prevail. |
|---|
| 2. Services: Client retains Attorney for the following services: Chapter 13 bankruptcy (debt adjustment) |
| 3. Scope of Representation: (a) Attorney will counsel and represent Client in all aspects of the above matter(s) for the fee specified in Paragraph 4 EXCEPT: (1) adversary proceedings; (2) post-discharge litigation; (3) appeals; (4) other (specify): |
| (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties. |
| 4. Pees: Legal fee: \$ \frac{1000000}{10000000000000000000000000000 |
| is unable to represent Client without receiving an advance payment retainer since a security retainer will be within the reach of Client's creditors. Should hourly billing be necessary, Attorney's billing rates are \$300-\$400/hour for partners, \$250/hour for associates, and \$90/hour for law clerks. The filing fee and expenses are subject to change at any time. The billing rates are subject to an annual review and potential increase every calendar year. |

The legal fee covers the initial consultation and all subsequent work. The case may be closed if the fees are not paid by the deadline. Additional legal fees may apply if the parties have entered into a Court-Approved Retention Agreement and such Agreement so authorizes, or if the case is converted from one chapter to another. Additional court costs may apply for amending a petition, list, schedule or statement postfiling or other reasons not due to Attorney's fault. NSF checks will be assessed a \$20 fee.

- 5. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial):
 - The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2
 - The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures
 - The difference among various types of retainer and that Client has made the choice identified in Paragraph 4
 - (A) A Chapter 13 plan will be submitted to the Court in good faith. The plan payment may have to increase if creditor claims come in higher than scheduled, creditors successfully argue that they are entitled to a higher interest rate, the Trustee successfully argues that the budgeted income is lower than actual income, the Trustee successfully argues that budgeted expenses are unreasonably high or the Court makes a finding that the plan is not the best effort you can make to repay your creditors.

TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify):

Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed.

- 6. Client's Duties. Client agrees, during the course of representation, to:
- (a) provide Attorney with full, accurate and timely information, financial and otherwise;
- (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents and information;
- (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty:
- (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and
- (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
- 7. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ outside counsel, at Attorney's expense, to work on this case, including: Kathleen W. Vaught, Kelly M. Johnson, David Carter, or Christina Banyon.
- 8. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, and Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.

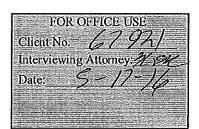
2) me ARDC#

BILLBUSTERS

Ledford, Wu and Borges, LLC

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

CONSULTATION AGREEMENT



THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:

5. Rees (check one)

- a. analyzing Client's financial circumstances based on information provided by Client;
- b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
- if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's
 options, informing Client what additional information Client needs to provide in order to enable Attorney to
 provide such advice and information;
- d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
- e. to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client

| e. 10y (c. 10). |
|--|
| A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-clien relationship shall terminate at the conclusion of the interview |
| Client agrees to pay \$ in nonrefundable consultation fee |
| In the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation of the parties' obligations and a breakdown of the costs. |
| 6. Acknowledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code. |
| x Aprobation x |
| Attorney Signature: 2 Slun ARDC #: 6289399 |

United States Bankruptcy Court Northern District of Illinois

| In re | April L Burton | | Case No. | |
|-------|--|---|----------------|---------------------------|
| | | Debtor(s) | Chapter | 13 |
| | VE | RIFICATION OF CREDITOR MA | TRIX | |
| | | Number of C | reditors: | 32 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor | rs is true and | correct to the best of my |
| Date: | June 2, 2016 | /s/ April L Burton April L Burton Signature of Debtor | | |

Acs 501 Bleecker St Utica, NY 13501

Acs/jp Morgan Chase Ba 501 Bleecker St Utica, NY 13501

American First Finance 7330 W. 33rd Stree Wichita, KS 67205

Arnold Scott Harris, P.C. 111 W. Jackson Blvd Ste 600 Chicago, IL 60604

AT&T U-verse PO Box 5014 Carol Stream, IL 60197

Blatt, Hasenmiller, Leibsker 10 S. LaSalle Street, Suite 2200 2015 M1 130660 Chicago, IL 60603

BMO Harris 115 South LaSalle Street Chicago, IL 60603

Capital One Po Box 30285 Salt Lake City, UT 84130

City of Chicago Dept of Revenue P.O. Box 88292 Chicago, IL 60680-1292

City of Chicago Corporate Counselor 121 N. LaSalle Street Suite 600 Chicago, IL 60602 City of Chicago Dept. of Finance PO Box 6330 Chicago, IL 60680

COMCAST PO Box 802068 Dallas, TX 75380-2068

Comcast PO Box 3002 Southeastern, PA 19398-3002

Comcast Cable P.O. Box 15630 Wilmington, DE 19850

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Comenity Bank/Victoria Secret Po Box 18215 Columbus, OH 43218

Dev Mittal 1851 Raes Creek Dr. Bolingbrook, IL 60490

Evans Lowenstein et al 130 S. Jefferson Suite 350 Chicago, IL 60661

Fbcs 330 S Warminster Rd Ste Hatboro, PA 19040

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Fed Loan Servicing Po Box 69184 Harrisburg, PA 17106 IC Systems, Inc 444 Highway 96 East Po Box 64378 St Paul, MN 55164

Linebarger Goggan Blair & PO Box 06152 Chicago, IL 60606-0152

Markoff Law LLC 29 N. Wacker Dr. #550 2015 SR 1448 Chicago, IL 60606

Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773

Nicor Gas PO Box 2020 Aurora, IL 60507

Portfolio Receovery Associates P.O.Box 41067 Norfolk, VA 23541

Salt Creek Credit Union 911 N. Elm St., Suite 129 Hinsdale, IL 60521

Stellar Recovery Inc 1327 Hwy 2 W Suite 100 Kalispell, MT 59901

T-Mobile PO Box 742596 Cincinnati, OH 45274-2596

Village of Alsip 4500 W. 123rd Alsip, IL 60803 Wells Fargo Auto Finance PO Box 29704 Phoenix, AZ 85038-9704